•	Bec	8	. 16	ia (1			2	1. 34	<u> </u>	48,50,	52	
									eplication or Docket Number				
	PATENT A	ICATIO!	N FEE DI	D	D Julia ma								
Effective November 10, 1998 09/436095													
CLAIMS AS FILED - PART I								SWALL ENTITY OTHER THAN					
(Column 1) (Column 2) FOR NUMBER FILED NUMBER EXTRA								PE		OR	SMALL		
FOR NUMBER FIL					NUMBEREATRA			TE	FEE		RATE	FEE	
BASIC FEE									380.00	OR		760.00	
TOTAL CLAIMS . 27 minus 2					20= 2	X\$	X\$ 9=		OR	X\$18=	126.00		
IND	EPENDENT CL	AIMS	6	7 minus	3= 3	• 3			X39=		X78=	234.00	
MU	LTIPLE DEPEN	DENT	CLAIM PR	ESENT	N		.460			OR	1000		
And the second of the second o							+13 TO1		ļ	OR	+260=		
* If the difference in column 1 is less than zero, enter "0" in column 2										OR	TOTAL	113010	
CLAIMS AS AMENDED - PART II								M 1	ENTITY	OR	OTHER SMALL		
(Column 1) (Column 2) (Column 3)									ADDI-			ADDI-	
TA		-	LAINING FTER	1	NUMBER PREVIOUSLY	PRESENT EXTRA	RA	ΤE	TIONAL		RATE	TIONAL	
MEN	* * * * * * *	AME	NDMENT		PAID FOR				FEE			FEE	
AMENDMENT	Total	•		Minus	**	-	X\$	9=		OR	X\$18=		
ABE	Independent	•		Minus	***	<u> </u>	Х3	9=		OR	X78=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							0=		OR	+260=		
								OTAL			TOTAL		
	(Column 1) (Column 2) (Column 3)							FEE		JOA	ADDIT. FEE		
			lumn 1) Laims	<u> </u>	(Column 3)	-		ADDI-	a !		ADDI-		
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_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR			
+1										OR	+260=	<u></u>	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE										OR	TOTAL ADDIT, FEE		
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													
на годиви милов мемочку маю гол (том от повреновня) is он поднестниями выхоляния фрофициа вость общент.													